

## PATENT APPLICATION SERIAL NO.

## U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

| 1/07/1997 CSTREATE 00000026 08902849 | FC:201 385.00 GP | FC:203 275.00 GP | FC:202 60.00 GP | 798 | 11:0807

PTO-1556 (5/87)

Application or Docket Number													
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 1997											,84	19	
CLAIMS AS AMENDED - PART II . (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OR _	OTHER THAN		
불	A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.44	Minus	"45	=		x. 9	<u>-</u>		OR	×_{8=		
	independent	.4	Minus	-5	= 0	1	× 39	=		OR	×78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+136	3 =		OR	+260=		
										<b>~</b>	TOTAL DDIT. FEE		
		(Çolumn 1)		(Column 2)	(Column 3)		SI	IALL	ENTITY	OR _	OTHER SMALL		
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		ŔĀ	rE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**	=		x 9	=		OR	x /8 =		
	Independent	•	Minus	***	=		×3	9=		OR	× 78'=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+/3	Ø=		OR	+260=		
(Column 1) (Column 2) (Column 3)								TAL FEE		OR	TOTAL ADDIT. FEE		
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		R/	Œ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**	=	1	x\$	9=		OR	x:/8=		
	Independent	•	Minus	***	=	<u> </u>	X.	9=		OR	× 78=		1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+/	30=		OR	+260=		
	(Column 1) (Column 2) (Column 3)							TOTAL T. FEE		OR	ADDIT. FE	L E	-
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT		F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**	=		X	§9 =		OF	x\$/8	:	_
	Independer	nt *	Minus	***	=			39=		OF	× 78=		_
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							130=		OF	040		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  * ADDIT. FEE  * This This Paid For Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.											יייוטעא	AL EE	